Atty Docket No.: TAW-007

Inventor: Masahiro Ohta, et al.

\*Application No.: NEW APPLICATION

Title: ACTUATOR

Filing Date: Concurrently Herewith

## **Documents Filed:**

Utility Patent Application Transmittal (1 page)

Application Data Sheet (3 pages)

Specification (18 pages)

Figures 1(a) - 10(b) (7 sheets)

Claim for Priority and Submission of Document (2 pages)

Certified copy of Priority document JP 2002-308083

Fee Transmittal (1 page in duplicate)

Via: Express Mail: Airbill No. EV 311 019 071 US

Sender's Initials: AAL/Igh

Charge \$770.00 to deposit account 12-0080



Date: October 23, 2003

Atty Docket No.: TAW-007

Inventor: Masahiro Ohta, et al.

**Application No.:** NEW APPLICATION

Title: ACTUATOR

Filing Date: Concurrently Herewith



## **Documents Filed:**

Utility Patent Application Transmittal (1 page)

Application Data Sheet (3 pages)

Specification (18 pages)

Figures 1(a) - 10(b) (7 sheets)

Claim for Priority and Submission of Document (2 pages)

Certified copy of Priority document JP 2002-308083

Fee Transmittal (1 page in duplicate)

Via: Express Mail: Airbill No. EV 311 019 071 US

Sender's initials: AAL/Igh

Charge \$770.00 to deposit account 12-0080

Date: October 23, 2003

EN377074057112



NO POSTAGE STAMP NECESSARY POSTAGE HAS BEEN PREPAID BY

LAHIVE & COCKFIELD, LLP 28 STATE STREET BOSTON, MA 02109





Mailing Label Label 11-F June 2002



## Post Office To Addressee

ORIGIN (POSTAL	JSE ONLY)		DELIVERY (POST	TAL USE ONLY)	
PO ZIP Code	Day of Delivery	Flat Rate Envelope	Delivery Attempt	Time	Employee Signature
	Next Second		Mo. Day	□ AM □ PM	
Date In		Postage	Delivery Attempt	Time	Employee Signature
Mo, Day Year	12 Noon 3 PM	\$	Mo. Day	□ AM □ PM	
Come In	Military	Return Receipt Fee	Delivery Date	Time	Employee Signature
AM DPM	2nd Day 3rd Day		Mo. Day	□AM □PM	
Weight lbs. ozs	Int'l Alpha Country Code	COD Fee Insurance Fee	Walverouslanduretere	caganiter daliverviento av	littenatimeren mit einen met eile vitetti oteon met mittive det deling singan voer solled sevimen gut de emikalishing sepre
No Delivery	Acceptance Clerk Initials	Total Postage & Fees	Veriodinalibrandiacii edV Veriodinalibrandia	्राचीन प्राप्तक्रियः इत्तरीन प्राप्तक्रियः इत्तरीन प्राप्तक्रियः	operation and the control of the con
CUSTOMER USE ONLY			The state of the s		
METHOD OF PAYMENT: Express Mail Corporate Acct. No.	X022061		Federal Agency Acct. No. or Postal Service Acct. No.		
FROM: (PLEASE PRINT)	PHONE (		TO: (PLEASE PRINT)	PHON	E ()
. .r		•	I F	E ADDITOAM	7
LAHIVE &	COCKFIELD L	LP	· ·	T APPLICAT	
LAHIVE & COCKFIELD LLP 28 STATE ST FL 24			COMMISSIONER FOR PATENTS		
BOSTON MA 02109-1784			P.O. BOX 1450		
			ALEXANDR1	[A, VA 22	313-1450
Anthony	A. Laurentano	/1gh TAW-007			
1		· .			
, L	•		J L		4
PRESS HARD.	S FOR PICKUP O	R TRACKING CALL 1-8	200 222 4944 141	www.uene.com	, = # H = = = = = = = = = = = = = = = = =

621/ 1000

F: 02



UNITED STATES POSTAL SERVICE®

FOR PICKUP OR TRACKING CALL 1-800-222-1811





Customer Copy
Label 11-F June 2002

Post Office To Addressee

	DELIVERY (POSTAL USE ONLY)
ORIGIN (POSTAL USE ONLY)  Fiat Rate Envelope	Delivery Attempt Time Employed Signature
PO ZIP Code Day of Delivery Flat Rate Envelope	1 231
Next - Second -	Mo. Day AM DEM
Date In Postage	Delivery Attempt Time Employee Signature
	MO DAY DAM GRAM TO 3 2003 18
Mo. Day Year 12 Noon 3 PM \$	Delivery Date Time Wamproyee Signatures
Time In Military Return Receipt Fee	Delivery Sale
	Mo. Day AM DPM
Weight Int'l Alpha Country Code COD Fee Amsurance Fee	WAIVER OF SIGNATURE (Domestic Only) Additional provided assurance is void if y waiver of signature in requested. I wish delivery the first of the control of
Weight Int'l Alpha Country Code COD Fee	watvor of signature is requested. I wish delivery to be made wheely obtaining signature of
lbs. Ozs.	walvor of signature is requested. Wash centrely addresses or addresses or addresses or addresses or addresses agent (it delivery employee) [Describes at title can be left in section location] and I suthorize that delivery employee salignature constitutes walld proof of delivery by
No Delivery Acceptance Clerk Initials Total Postage A Fees	NO DELIVERY Weekend Hollday
Weekend Holiday	Customer, Signature)
CUSTOMER USE ONLY	
COSTOMER OSI- CITE	Francis Assess Aget No. or
METHOD OF PAYMENT:	Federal Agency Acct. No. or Postal Service Acct. No.
	Federal Agency Acct. No. or Postal Service Acct. No.
METHOD OF PAYMENT: Express Mail Corporate Acct. No. X 0 2 2 0 6 1	Foderal Agency Acct. No. or Postal Service Acct. No.  TO: (PLEASE PRINT) PHONE (
METHOD OF PAYMENT:	
METHOD OF PAYMENT: Express Mail Corporate Acct. No. X 0 2 2 0 6 1	TO: (PLEASE PRINT) PHONE ()
FROM: (PLEASE PRINT)  PHONE (	TO: (PLEASE PRINT) PHONE (
FROM: (PLEASE PRINT)  LAMIYE & COOKFIELD LIP  2 STATE STEEL	TO: (PLEASE PRINT) PHONE ()
FROM: (PLEASE PRINT)  LAMITYCA COCKFIELD LLP  28 STATE ST FL 24	TO: (PLEASE PRINT) PHONE (
FROM: (PLEASE PRINT)  FROM: (PLEASE PRINT)  PHONE ( )  1 A FIT V ( ) & CAR SEPTIFUL LLP	TO: (PLEASE PRINT)  MS PATENT APPLICATION  COMMISSIONER FOR PATENTS  P.O. BOX 1450
FROM: (PLEASE PRINT)  LAMIVE & CHORFIELD LLP 28 STATE ST FL 24 BUSTUM MA U2109-1784	TO: (PLEASE PRINT)  MS PATENT APPLICATION  COMMISSIONER FOR PATENTS
FROM: (PLEASE PRINT)  LAMIVE & CHORFIELD LLP 28 STATE ST FL 24 BUSTUM MA U2109-1784	TO: (PLEASE PRINT)  MS PATENT APPLICATION  COMMISSIONER FOR PATENTS  P.O. BOX 1450
FROM: (PLEASE PRINT)  LAMIVE & CHEKFIELU LLP 28 STATE ST FL 24 BUSTUM MA U2109-1784	TO: (PLEASE PRINT)  MS PATENT APPLICATION  COMMISSIONER FOR PATENTS  P.O. BOX 1450
FROM: (PLEASE PRINT)  LAMIVE & CHORFIELD LLP 28 STATE ST FL 24 BUSTUM MA U2109-1784	TO: (PLEASE PRINT)  MS PATENT APPLICATION  COMMISSIONER FOR PATENTS  P.O. BOX 1450